

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address):      TELEPHONE NO.: _____ FAX NO.: _____ ATTORNEY FOR (Name): _____	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO</b> <input type="checkbox"/> KEARNY MESA BRANCH, 8950 CLAIREMONT MESA BLVD., SAN DIEGO, CA 92123-1187 <input type="checkbox"/> NORTH COUNTY DIVISION, 325 S. MELROSE DR., VISTA, CA 92081-6635 <input type="checkbox"/> EAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA 92020-3941 <input type="checkbox"/> RAMONA BRANCH, 1428 MONTECITO RD., RAMONA, CA 92065-5200 <input type="checkbox"/> SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910-5649	
PLAINTIFF(S)	
DEFENDANT(S)	
<b>REQUEST TO ENTER SATISFACTION OF JUDGMENT (CCP 116.850)</b>	CASE NUMBER _____

I, \_\_\_\_\_, am the judgment debtor and request Satisfaction of Judgment be entered. This request is based upon:

- ☐ The judgment and costs have been paid in full to the judgment creditor.
- ☐ The judgment creditor has been requested to file a satisfaction of judgment and refuses to do so.
- ☐ The present address of the judgment creditor is unknown.
- ☐ The documents attached to this statement constitute evidence of payment of the judgment in full.

1. Full name and last know address of judgment creditor:
  
  
  
2. Full name and address of assignee of record, if any:
  
  
  
3. Full name and address of judgment debtor being fully released:

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: \_\_\_\_\_ (Signature of Declarant)

Based on the above declaration and attached documents, Satisfaction of Judgment is ordered.

Date: \_\_\_\_\_ Clerk by \_\_\_\_\_, Deputy

**NOTE TO JUDGMENT DEBTOR: This Satisfaction of Judgment, or acknowledgment of Judgment, must be recorded in each county in which an abstract of judgment was recorded. Further, if a judgment lien has been filed against personal property, this Satisfaction of Judgment must also be filed in the Office of the Secretary of State to terminate such lien.**

<div style="border: 1px solid black; width: 100px; height: 100px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> <b>SEAL</b> </div>	<b>CLERK'S CERTIFICATE</b>  The foregoing is a full, true and correct copy of the original on file in this office.  <b>CLERK OF THE SUPERIOR COURT</b>	Date: _____ by _____, Deputy
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